

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

05 FEB 15 AM 7:35
FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**LIMITED LIABILITY
COMPANY
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # M03000004153

1. Limited Liability Company's Name

HOMES & LAND, LLC

REINSTATEMENT 2004-2005

BK

| | | | | | |
|--|----------------|--|----------------|---|--|
| 2. Principal Office Address 3060 Peachtree Road | | 3. Mailing Office Address 3060 Peachtree Road | | 4. State/Country of Formation DE | |
| Suite, Apt. #, etc. Suite 200 | | Suite, Apt. #, etc. Suite 200 | | 5. Date Organized or Qualified To Do Business in Florida 12/15/2003 | |
| City & State Atlanta, GA | | City & State Atlanta, GA | | 6. FEI Number <input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable | |
| Zip 30305 | Country USA | Zip 30305 | Country USA | 7. CERTIFICATE OF STATUS DESIRED <input checked="" type="checkbox"/> \$5.00 Additional Fee required for a Certificate of Status | |

| | | | |
|--|-------------|-------------------|--|
| 8. Name and Address of Current Registered Agent | | | |
| Name NRAI Services, Inc. | | | |
| Street Address (P.O. Box Number is Not Acceptable) 2731 Executive Park Drive 500046928985 | | | |
| Suite, Apt. #, Etc. Suite 4 02/21/05--01027--009 **05.00 | | | |
| City Weston | State FL | Zip Code 33331 | |

9. I, being appointed the registered agent of the above named limited liability company, am familiar with and accept the obligations of Chapter 608, F.S.

Signature of Registered Agent Asim Hand, Asst sec Date 2/15/05

REGISTERED AGENT MUST SIGN

| 10. Names and Street Addresses of Managing Members/Managers | | | |
|---|-----------------------------------|--|--------------------|
| Titles | Name of Managing Members/Managers | Street Address of Each Managing Member/Manager | City / State / Zip |
| S | James S. Altenbach | 3060 Peachtree Road, Ste. 200 | Atlanta, GA 30305 |
| D | Frank K. Bynum | 3060 Peachtree Road, Ste. 200 | Atlanta, GA 30305 |
| CEOD | F. Blair Schmidt Fellner | 3060 Peachtree Road, Ste. 200 | Atlanta, GA 30305 |
| COB | Gerald Hogan | 3060 Peachtree Road, Ste. 200 | Atlanta, GA 30305 |
| D | Michael Lazar | 3060 Peachtree Road, Ste. 200 | Atlanta, GA 30305 |
| D | Thomas R. Wall, IV | 3060 Peachtree Road, Ste. 200 | Atlanta, GA 30305 |

11. I certify that I am managing member/manager or the receiver or trustee empowered to execute this application as provided for in chapter 608, F.S. I further certify that when filing this reinstatement application the reason for dissolution has been eliminated, the limited liability company name satisfies the requirements of section 608.406, F.S., and that all fees owed by the limited liability company have been paid. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

Signature of Managing Member/Manager James S. Altenbach Date _____ Daytime Phone # _____

Typed or printed name of signing Managing Member/Manager _____

CR20041 (10/03)